

FEB 12 2007

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FROM: Peter Yim
Reg. 44,417

DATE: February 12, 2007

| | | |
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| Number of pages with cover page: | 20 | |
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Comments:

PLEASE PROCESS THE ATTACHED.

Re: U.S. Patent Application No. 10/608,300
For: OPTICAL METROLOGY OF STRUCTURES
FORMED ON SEMICONDUCTOR WAFERS USING
MACHINE LEARNING SYSTEMS
By: Srinivas DODDI et al.
Our reference: 50998-20055.00

Attached is the following:

1. Transmittal (1 page).
2. Fee Transmittal (in duplicate, 2 pages)
3. Petition for Extension of Time (1 page)
4. Appeal Brief (15 pages)

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PTO/SB/17 (01-08)

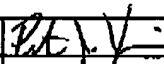
Approved for use through 7/31/2006. OMB 0651-0032
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| | | | |
|---|--|--|--|
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006 | | Complete if Known Application Number: 10/808,300 Filing Date: June 27, 2003 First Named Inventor: Srinivas DODDI Examiner Name: N. Brown Art Unit: 2121 Attorney Docket No.: 509982005500 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 620.00 | | | |

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| METHOD OF PAYMENT (check all that apply) | |
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| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
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| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |

| FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------|--|---------------|-----------------------|------------------|-----------------------|------------------------------|--------------|--------------|--|----------|---------------|---------|------|--|---|---------------------------|--|----------|---------------|-----|------|
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | | | | | | | | | | | | | | |
| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) | | | | | | | | | | | | | | | |
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 0.00 | | | | | | | | | | | | | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | | | | | | | | | | | | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | | | | | | | | | | | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | | | | | | | | | | | | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | | |
| 2. EXCESS CLAIM FEES | | | | | | | | | | | | | | | | | | | | | | |
| Fee Description | | | | | | | Small Entity Fee (\$) | | | | | | | | | | | | | | | |
| Each claim over 20 (including Reissues) | | | | | | | 50 | | | | | | | | | | | | | | | |
| Each independent claim over 3 (including Reissues) | | | | | | | 200 | | | | | | | | | | | | | | | |
| Multiple dependent claims | | | | | | | 360 | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>29</td> <td>-29 = 0</td> <td>x 50 =</td> <td>0.00</td> </tr> </table> | | | | | | | Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | 29 | -29 = 0 | x 50 = | 0.00 | <table style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2">Multiple Dependent Claims</th> </tr> <tr> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>360</td> <td>0.00</td> </tr> </table> | | Multiple Dependent Claims | | Fee (\$) | Fee Paid (\$) | 360 | 0.00 |
| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | |
| 29 | -29 = 0 | x 50 = | 0.00 | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent Claims | | | | | | | | | | | | | | | | | | | | | | |
| Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | | | |
| 360 | 0.00 | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>3</td> <td>-3 = 0</td> <td>x 200 =</td> <td>0.00</td> </tr> </table> | | | | | | | Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | 3 | -3 = 0 | x 200 = | 0.00 | | | | | | | | |
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | |
| 3 | -3 = 0 | x 200 = | 0.00 | | | | | | | | | | | | | | | | | | | |
| HP = highest number of total claims paid for, if greater than 20. HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | | | | | | | | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | | | | | | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>- 100 =</td> <td>/50</td> <td>(round up to a whole number) x</td> <td>=</td> <td></td> </tr> </table> | | | | | | | | Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | - 100 = | /50 | (round up to a whole number) x | = | | | | | | |
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | |
| - 100 = | /50 | (round up to a whole number) x | = | | | | | | | | | | | | | | | | | | | |
| 4. OTHER FEE(S) | | | | | | | | | | | | | | | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | | | | | | | | | | | | | | | |
| Other (e.g., late filing surcharge): 1402 Filing a brief in support of an appeal | | | | | | | 500.00 | | | | | | | | | | | | | | | |
| 1251 Extension for response within third month | | | | | | | 120.00 | | | | | | | | | | | | | | | |

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|---------------------|---|-----------------------------------|-------------------|
| SUBMITTED BY | | | |
| Signature |  | Registration No. (Attorney/Agent) | 44,417 |
| Name (Print/Type) | Peter J. Yim | Telephone | (415) 268-8373 |
| | | Date | February 12, 2007 |

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PTO/SB/21 (09-04)

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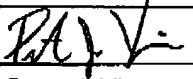
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| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/608,300 | |
| | Filing Date | June 27, 2003 | |
| | First Named Inventor | Srinivas DODDI | |
| | Art Unit | 2121 | |
| | Examiner Name | N. Brown | |
| Total Number of Pages in This Submission | 19 | Attorney Docket Number | 509982005500 |

ENCLOSURES (Check all that apply)

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate, 2 pages) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Brief) (15 page) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Cover Sheet (not counted as part of this submission) |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|--------|
| Firm Name | MORRISON & FOERSTER LLP (Customer No. 20872) | | |
| Signature |  | | |
| Printed name | Peter J. Yim | | |
| Date | February 12, 2007 | Reg. No. | 44,417 |

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: February 12, 2007

Signature:  (Peter J. Yim)